PERSONAL QUALIFICATIONS STATEMENT

Budget Bureau
Approved 50-R0387

1a. Kind of position *(job)* you are filing for *(or title of examination)*: Lead Foreman (Harbor) MS-3/9

b. Announcement number:

7. Birth date: Month / Day / Year: [redacted]

8. Social Security Number:

c. Options for which you wish to be considered *(if listed in examination announcement)*: Lead Foreman Stevedore

9. If you are currently on a register of eligibles for appointment to a Federal position, give the name of the examination, the name of the office maintaining the register, the date on your notice of rating, and your rating.

d. Primary place(s) you wish to be employed: Canal Zone

2. Home telephone: Area Code / Number: 43-5461

3. Business telephone: Area Code / Number: 43-5833

4. Name *(Last) (First) (Middle) (Maiden, if any)*: Naron Upton Wade — [x] Mr. [ ] Miss [ ] Mrs.

10. Lowest pay or grade you will accept: PAY $ Prevaling Per ____ OR GRADE ____

5. Number and street, R.D., or Post Office box number: Box 14

11. Are you willing to travel? *(Check one)*: NO [ ] SOME [ ] OFTEN [x]

12. When will you be available? Immediately

6. City / State / ZIP Code: Gatun, Canal Zone

13. Will you accept:

	YES	NO
(A) Temporary appointment of —1 month or less?		
—1 to 4 months?		
—4 to 12 months?		
(B) Less than full time work? *(Less than 40 hours per week)*		

(C) Will you accept a job in:

	YES	NO
—Washington, D.C.?		X
—any place in the United States?		X
—outside of the United States?	X	
—only in *(specify)*:	CANAL ZONE	

14. EDUCATION

(A) Did you graduate from high school, or will you graduate within the next nine months?

YES	MONTH/YEAR	NO	HIGHEST GRADE COMPLETED
X	June 1935		

(B) Name and location *(city and State)* of last high school attended: George Washington High School, Los Angeles, Californai

(C) Name and location *(city, State, and ZIP Code if known)* of college or university. *(If you expect to graduate within 9 months, give MONTH and year you expect degree.)*

	Dates attended From	Dates attended To	Years completed Day	Years completed Night	Credits completed Semester hours	Credits completed Quarter hours	Type of degree	Year of degree
None								

(D) Chief undergraduate college subjects	Credits completed Semester hours	Credits completed Quarter hours	(E) Chief graduate college subjects	Credits completed Semester hours	Credits completed Quarter hours

(F) Major field of study at highest level of college work

(G) Other schools or training *(for example, trade, vocational, armed forces, or business)*. Give for each the name and location *(city, State, and ZIP Code if known)* of school, dates attended, subjects studied, certificates, and any other pertinent data.

USAF Airplane & Engine Mechanic-Keesler Fld., Miss. May to 11/47

15. HONORS, AWARDS, AND FELLOWSHIPS RECEIVED

16. FOREIGN LANGUAGES

Enter foreign languages and indicate your knowledge of each by placing "X" in proper columns	Reading Excl	Reading Good	Reading Fair	Speaking Excl	Speaking Good	Speaking Fair	Understanding Excl	Understanding Good	Understanding Fair	Writing Excl	Writing Good	Writing Fair
Spanish		X		X			X					X

17. Special qualifications and skills *(licenses; skills with machines, patents or inventions; publications—do not submit copies unless requested; public speaking; memberships in professional or scientific societies; typing or shorthand speed; etc.)*

Two-way radio, both vehicle and hand.
Heavy Equipment operating (fork lifts up to 25 tons, Towing vehicles, Lorain Crane and "Cherry-Picker Crane")
Drivers License - Railroad locomotive fireman and yard hosteler. (Steam)

PLEASE BE SURE TO READ ATTACHED INSTRUCTIONS BEFORE COMPLETING ITEM 18

18. EXPERIENCE *(Start with your PRESENT position and work back)*

May inquiry be made of your present employer regarding your character, qualifications, and record of employment? YES NO

1

Dates of employment *(month, year)* From 8/19/62 To PRESENT TIME

Exact title of position: Towing Locomotive Operator

If Federal service, classification series and grade: MG-9

Salary or earnings: Starting $ per; Present $ 5.30 per hr.

Avg. hrs. per week: 40

Place of employment: City: Gatun; State: Canal Zone

Number and kind of employees supervised: 1 helper MG-4

Kind of business or organization *(manufacturing, accounting, insurance, etc.)*: Federal Govt. Panama Canal Co.

Name and title of immediate supervisor: Goerge C. Scheibe -Lockmaster

Area Code and phone No. if known:

Name of employer *(firm, organization, etc.)* and address *(including ZIP Code, if known)*: Gatun Locks, Locks Div., Marine Bureau

Reason for wanting to leave: Applying for higher-graded position

Description of work: See copy attached of "Position Description.

Also is instructor of trainee "Towing Locomotive Operator" from 1968 to present - see copy attached to "Position Description"

For agency use *(skill codes, etc.)*

2

Dates of employment *(month, year)* From March 1962 To 8/18/62

Exact title of position: Post Office Substitute Window Clerk

If Federal service, classification series and grade: PO-PS-530-4

Salary or earnings: Starting $ per; Final $ 2.62 per hr.

Avg. hrs. per week: NTE 30 hrs.

Place of employment: City: Balboa; State: C. Z.

Number and kind of employees supervised: None

Kind of business or organization *(manufacturing, accounting, insurance, etc.)*: Canal Zone Postal Service

Name and title of immediate supervisor: Supervisor David Rose -Mail Handling Unit

Area Code and phone No. if known:

Name of employer *(firm, organization, etc.)* and address *(including ZIP Code, if known)*: Postal Division, Civil Affairs Bureau, Canal Zone Government

Reason for leaving: To accept full-time higher-graded position

Description of work:

Sorted incoming and outgoing mail, packages, etc. Worked at window handling customers for all types of Postal services.

For agency use *(skill codes, etc.)*

3

Dates of employment *(month, year)* From Oct.1961 To Feb. 1962

Exact title of position: Salesman

If Federal service, classification series and grade: No

Salary or earnings: Starting $ per; Final $ 500.00 per month

Avg. hrs. per week: 55-60

Place of employment: City: Panama City; State: Panama

Number and kind of employees supervised: None

Kind of business or organization *(manufacturing, accounting, insurance, etc.)*: Liqour Products

Name and title of immediate supervisor: Ed Henriquez

Area Code and phone No. if known:

Name of employer *(firm, organization, etc.)* and address *(including ZIP Code, if known)*: Henriquez and Company

Reason for leaving: Accept employment with Federal Govt. - Canal Zone Govt.

Description of work:

Dealt with and sold all types of liquor products (Wholesale) to clubs in the Canal Zone.

For agency use *(skill codes, etc.)*

IF YOU NEED ADDITIONAL EXPERIENCE BLOCKS USE STANDARD FORM 171-A OR BLANK SHEETS
SEE INSTRUCTION SHEET

ATTACH SUPPLEMENTAL SHEETS OR FORMS HERE
Answer all questions correctly and fully

19. If you have ever been employed by the Federal government as a civilian, give your last: Grade	Job Title	20. Birth place City:	State (or Foreign Country):	21. Legal or voting residence (State)
MG-9	Towing Locomotive Operator	San Diego	California	California

22. REFERENCES. List three persons who are NOT related to you and who have definite knowledge of your qualifications and fitness for the position for which you are applying. Do not repeat names of supervisors listed under Item 18, EXPERIENCE.

Full Name	Present Business or Home Address (Number, street, city, State and ZIP Code)	Business or Occupation
Meeker, John W.	8534 Margarita, Box 333 Margarita	Pilots
Bell, Herbert S.	8004-B, Margarita, Box 582 Margarita	P. C. Company
Daniel, Enos E.	238-A, Coco Solo, Box 351, Coco Solo	Pilots
Vantine, Wilber H.	6541-B, Corozal	P. C. Company
Valintine, Robert	251-B, Gatun, Box 113, Gatun	Pilots
Skrable, Paul L.	235-B, Coco Solo, Box 288, Coco Solo	P. C. Company

23. VETERAN PREFERENCE. A. Have you ever served on active duty in the United States military service? (Exclude tours of active duty for training as a reservist or Guardsman.) If "Yes," complete Items B through E below.

	Yes	No
	X	

B. List for all active military service:

Dates (From–To)	Branch	Serial or Service Number
Jan. 1936-May 1938	U. S. Army	6 556 899
Jan. 1942-Dec. 1945	U. S. Air Force	AF 6556899
15 Jan. 1947-31 Aug. 1960 (Retired 20 years active Service)	U. S. Air Force	AF 6556899

C. Have you ever been discharged from the armed services under other than honorable conditions? (You may omit any such discharge changed to honorable by a Discharge Review Board or similar authority.) If "Yes," give details in Item 34.

	Yes	No
		X

D. Do you claim 5-point preference based on active duty in the armed forces? If "Yes," you will be required to furnish records to support your claim at the time you are appointed.

	Yes	No
	X	

E. Do you claim 10-point preference? If "Yes," complete and attach Standard Form 15. "Claim for 10-point Veteran Preference," together with the proof called for in that form.

	Yes	No
		X

ANSWER ITEMS 24 THROUGH 33 BY PLACING AN "X" IN THE PROPER COLUMN

	Yes	No
24. Are you a citizen of the United States? If "No," give country of which you are a citizen:	X	
25. Before answering this question read Item 25 in the attached instructions. A. Are you now, or within the last ten years have you been, a member of: (1) The Communist Party, U.S.A., or any subdivision of the Communist Party, U.S.A.?		X
(2) An organization that to your present knowledge advocates the overthrow of the constitutional form of government of the United States by force or violence or other unlawful means?		X
B. If your answer to Item A(1) or A(2) is "Yes," write your answers to the following questions in Item 34 or on a separate piece of paper: (1) The name of the organization? (2) The dates of your membership? (3) Your understanding of the aims and purposes of the organization at the time of your membership?		
26. To insure that you are not placed in a position which might impair your health, or which might be a hazard to you or to others, we need information about the following: Do you have, or have you had, heart disease, a nervous breakdown, epilepsy, tuberculosis, or diabetes? *If your answer is "Yes," concerning any one of these, give details in Item 34.*		X
27. Within the last five years have you been fired from any job for any reason?		X
28. Within the last five years have you quit a job after being notified that you would be fired? *If your answer to 27 or 28 above is "Yes," give details in Item 34. Show the name and address (including ZIP Code) of employer, approximate date, and reasons in each case. This information should agree with your answers in Item 18, EXPERIENCE.*		X
29. Have you ever been convicted of an offense against the law or forfeited collateral, or are you now under charges for any offense against the law? (You may omit: (1) traffic violations for which you paid a fine of $30.00 or less; and (2) any offense committed before your 21st birthday which was finally adjudicated in a juvenile court or under a Youth Offender law.)		X
30. While in the military service were you ever convicted by general court-martial? *If your answer to 29 or 30 is "Yes," give details in Item 34. Show for each offense: (1) date; (2) charge; (3) place; (4) court; and (5) action taken.*		X
31A. Does the United States Government employ in a civilian capacity or as a member of the Armed Forces any relative of yours (by blood or marriage)? (See Item 31 in the attached instruction sheet.)		X
B. Do you live with, or within the past 12 months have you lived with, any of these relatives who are employed in a civilian capacity? *If your answer to A is "Yes," give in Item 34 for such relatives: (1) full name; (2) present address (including ZIP Code); (3) relationship; (4) department, agency, or branch of the Armed Forces. If your answer to B is "Yes," also give the kind of appointment held by the relative(s) you live with or have lived with within the past 12 months.*		X
32. Do you receive or have you applied for retirement pay, pension, or other compensation based upon military or Federal civilian service? *If your answer is "Yes," give deails in Item 34.*	X	
33. Are you an official or employee of any State, territory, county, or municipality? *If "Yes," give type of position or name of office, and location, in Item 34. Include whether elected or appointed.*		X

34. Space for detailed answers. Indicate Item numbers to which answers apply.

Item No	
32	Retired USAF 20 years - as M/Sgt 8/31/60

If more space is required, use full sheets of paper approximately the same size as this page. Write on EACH sheet your name, birth date, and examination *(or position)* title. Attach all sheets to this Statement at the top of Page 3.

ATTENTION: READ THE FOLLOWING PARAGRAPH CAREFULLY BEFORE SIGNING THIS STATEMENT

A false answer to any question in this Statement may be grounds for not employing you, or for dismissing you after you begin work, and may be punishable by fine or imprisonment (U.S. Code, Title 18, Sec. 1001). All statements are subject to investigation, including a check of your fingerprints, police records, and former employers. All the information you give will be considered in reviewing your Statement and is subject to investigation. A false answer to Items 25 A or B could deprive you of your right to an annuity when you reach retirement age in addition to the penalties described above.

CERTIFICATION

I CERTIFY that all of the statements made in this Statement are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.

SIGNATURE *(Sign in ink)*

DATE SIGNED

DO NOT WRITE IN THIS BLOCK—FOR USE OF EXAMINING OFFICE ONLY

☐ Refer for medical action ☐ Medical action Approved by ☐ Disapproved *(reason)*:

Announcement No. Statement No.

Name

Appor. ☐ Nonappor. ☐

Material: Submitted ☐ Returned ☐

Entered Register:

Notations:

Form Reviewed:

Form Approved:

Option	Grade	Earned Rating	Preference	Aug. Rating
			5 Points *(Tent.)* ☐ 10 Points Comp Dis. ☐ Other 10 Points ☐ Disal. ☐ Being Investigated ☐	

Initials and Date

THIS SPACE FOR USE OF APPOINTING OFFICER ONLY

5-Pt. ☐ 10-Pt. Comp. Disab. ☐ 10-Pt. Other ☐

Preference has been verified through proof that the separation was under honorable conditions, and other proof as required.

Signature and Title

Agency

Date

GPO e48—80043-1 1968 294-475

CONTINUATION SHEET FOR STANDARD FORM 171
"PERSONAL QUALIFICATIONS STATEMENT"

Budget Bureau Approved 50-R0387

INSTRUCTIONS—Fill out this form only when necessary for completion of Item 18 "EXPERIENCE," on Standard Form 171. Enclose with your Statement. Typewrite or write clearly in dark ink.

1. Name (Last) (First) (Middle) (Maiden, if any)	2. Birth date (Month, day, year)
Naron Upton Wade ☒ Mr. ☐ Miss ☐ Mrs.	[redacted]
3. Kind of position applied for, or name of examination	4. Date of this continuation sheet
	April 1972

4

Dates of employment (month, year)	Exact title of position	If Federal service, classification series and grade
From Oct. 1960 To Oct. 1961	Locomotive Operator	MG 10

Salary or earnings	Avg. hrs. per week	Place of employment	Number and kind of employees supervised	Kind of business or organization (manufacturing, accounting, insurance, etc.)
Starting $ 600.00 per mo. Final $ per		City: Gatun State:	One Helper	Federal Govt. Panama Canal Co.

Name and title of immediate supervisor	Name of employer (firm, organization, etc.) and address (including ZIP Code, if known)
Chief, Locks Div., Mr. Wm. A. Van Siclen,	Gatun Locks, Locks Div., Marine Bureau
Area Code and phone No. if known	

Reason for leaving: Terminated at end of 1 year tempory employment.

Description of work:

Same duties and responsibilities as indicated in "Position Description"--copy attached for experience from 8/62 to present

For agency use (skill codes, etc.)

5

Dates of employment (month, year)	Exact title of position	If Federal service, classification series and grade
From Oct. 1959 To August 1960	NCO In Charge Master Sgt. US Air Force	M/Sgt.

Salary or earnings	Avg. hrs. per week	Place of employment	Number and kind of employees supervised	Kind of business or organization (manufacturing, accounting, insurance, etc.)
Starting $ per Final $ Prevaling per	full time	City: Homestead AF Base State: Florida	7 Enlisted Per. 615 civilians	USAF

Name and title of immediate supervisor	Name of employer (firm, organization, etc.) and address (including ZIP Code, if known)
Maj. Wm. C. Van Norman	US Air Force
Area Code and phone No. if known	

Reason for leaving: Voluntary Rotirement

Description of work: Assigned to Base Housing Section.

As Non-Commissioned Officer in Charge, supervised and managed office, guest motel, alert quartes, and other various housing units involving 3 sections; Combat Alert Quarters housing 90 personnel, Base Bachelor NCO Quarters housing 100 NCO and their dependents, and Base Guest Quarters housing 75 military and their dependents. See "Commendation" Ltr. 8/30.60

For agency use (skill codes, etc.)

6

Dates of employment (month, year)	Exact title of position	If Federal service, classification series and grade
From 8/1955 To 9/59	Maintenance Supervisor, Line Chief, Air Freight Dispatcher	USAF

Salary or earnings	Avg. hrs. per week	Place of employment	Number and kind of employees supervised	Kind of business or organization (manufacturing, accounting, insurance, etc.)
Starting $ Prevailing per Final $ per	full time	City: Santiago State: Chile	5 Enlisted Personnel 6 permanent *	USAF Air Mission

Name and title of immediate supervisor	Name of employer (firm, organization, etc.) and address (including ZIP Code, if known)
Lt. Col. Bertil E. Benson	US Air Force *Chilean civilians plus up to 100 temporary, Average 40-50.
Area Code and phone No. if known	

Reason for leaving: Reassignment--change of station

Description of work: Supervised, and had full responsibility for, movement and loading and unloading of all air freight entering and Leaving Chile.

Dealt with Chilean customs and immigration officials in liberation of both air and surface freight. Supervised and responsible for maintenance of all USAF aircraft and heavy duty equipment entering, leaving, or permanently stationed in Chile.

Inspector for contract maintenance on Chile based aircraft and USAF motor vehicles and heavy duty equipment.

For agency use (skill codes, etc.)

7

Dates of employment (month, year) From 9/1954 To 7/1955

Exact title of position: Student, Language School

If Federal service, classification series and grade: Master Sgt.

Salary or earnings: Starting $ per; Final $ Prevailing per

Avg. hrs. per week: full time

Place of employment: City: Washington; State: D. C.

Number and kind of employees supervised: none

Kind of business or organization (manufacturing, accounting, insurance, etc.): USAF

Name and title of immediate supervisor: Dr. Smith, Director of Language School

Area Code and phone No. if known:

Name of employer (firm, organization, etc.) and address (including ZIP Code, if known): U. S. Air Force

Reason for leaving: Assigned to USAF Mission, Santiago, Chile

Description of work: Student at US State Department Language School - courses included 600 hrs. intensified Spanish, 400 hrs. Latin American Public Relations, Latin customs, habits, history and Geography.

For agency use (skill codes, etc.):

8

Dates of employment (month, year) From Jan. 1950 To Aug. 1954

Exact title of position: Supervisor Line Chief & Inspector

If Federal service, classification series and grade: Tech. Sgt. then Master Sgt.

Salary or earnings: Starting $ per; Final $ Prevailing per

Avg. hrs. per week: full time

Place of employment: City: Washington; State: D. C.

Number and kind of employees supervised: 3 enlistedPers. plus intermittent*

Kind of business or organization (manufacturing, accounting, insurance, etc.): U. S. Air Force

Name and title of immediate supervisor: Standford E. Moore - Warrant Officer

Area Code and phone No. if known:

Name of employer (firm, organization, etc.) and address (including ZIP Code, if known): U. S. Air Force

*Indirect supv. over avg. 20 flight status pers.

Reason for leaving: Selected and transferred to US.State Dept. Language School

Description of work: As Maintenance Supervisor-Test Flight Engineer-Inspector for all Bolling Field based USAF aircraft, supervised and responsible for maitenance of such aircraft and test flight checking. Also was teletype-telephone air traffic control centers in the U.S. (Inspector General flight Service Planes)

For agency use (skill codes, etc.):

9

Dates of employment (month, year) From Jan. 1948 to Dec.1949

Exact title of position: Dock Chief Engineer & Aircraft Mech.

If Federal service, classification series and grade: Staff Sgt.

Salary or earnings: Starting $ per; Final $ Prevailing per

Avg. hrs. per week: full time

Place of employment: City: Burtonwood; State: England

Number and kind of employees supervised: Avg. at least 20 enl. pers. plus*

Kind of business or organization (manufacturing, accounting, insurance, etc.): USAF

Name and title of immediate supervisor: Colonel Anderson

Area Code and phone No. if known:

Name of employer (firm, organization, etc.) and address (including ZIP Code, if known): U.S. Airforce

*7 English civilians (incl. avg. of 40 civilians temp.)

Reason for leaving: Reassigned to Washington, D. C.

Description of work: Test flight engineer and towed and taxied aircraft with cleetrack heavy duty towing equipment. As Dock Chief supervised moving, docking and spotting large aircraft and PLM (Production Line Maintanance) on engines in support of Berlin Airlift.

For agency use (skill codes, etc.):

10

Dates of employment (month, year) From Jan.1947 To Dec. 1948

Exact title of position: Airplane and engine Mechanic

If Federal service, classification series and grade: Sgt.

Salary or earnings: Starting $ per; Final $ Prevailing per

Avg. hrs. per week: Full time

Place of employment: City: Washington; State: D. C.

Number and kind of employees supervised: occ. 2 or 3 enl.pers.

Kind of business or organization (manufacturing, accounting, insurance, etc.): USAF

Name and title of immediate supervisor: Colonel Robina

Area Code and phone No. if known:

Name of employer (firm, organization, etc.) and address (including ZIP Code, if known): U. S. Air Force

Reason for leaving: Reassignment to England

Description of work: Member of test flight crew - aircraft maintenance scheduling (operations) for P.L.M. maintenance docks. Towed aircraft in and out of hanger according to operations dispatches using cleetrack heavy duty towing equipment.

For agency use (skill codes, etc.):

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